



300 MCMILLAN ROAD

WOODVILLE WI, 54028

(715) 698-2111

APPLICATION FOR EMPLOYMENT

OEM provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, ethnicity, religion, gender, sexual orientation, national origin, age, arrest or conviction record, disability, marital status, pregnancy, genetic information or status as covered veterans in accordance with applicable federal, state and local laws.

(applicationREF)

PERSONAL			
Last Name	First	Middle	Today's Date / /
Street Address		Home Telephone:	- -
City, State, Zip		Message Telephone:	- -
Were you referred by a current OEM team member? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, write the name of the team member who referred you:	
If not referred, how did you hear about OEM?		Email:	
Position Desired:	Expected Pay:	How long at present address:	
Only U.S. Citizens or aliens who have a legal right to work in the U.S. are eligible for employment. Can you, upon employment, provide genuine documentation establishing your identity and eligibility to be legally employed in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever applied for employment with us: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, approximate date: / /	
Have you ever worked for the company before: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, approximate date: / /	
If you are under age 18, please state your age:		Can you supply working papers: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been convicted of a crime (including misdemeanors):		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please explain: _____ A record will not automatically disqualify you for employment.			
Have you ever been discharged from any other employment or asked to resign: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:			
Will you work overtime if asked: <input type="checkbox"/> Yes <input type="checkbox"/> No		Date available for work: / /	
What shifts/hours are you able to work (see below): Circle all that apply: 1st 2nd 3rd 4th			
First: Monday - Thursday 6:00 AM to 4:30 PM		Second: Monday - Thursday 4:30 PM to 3:00 AM	
Third: Friday – Sunday 6:00 AM to 6:00 PM		Fourth: Friday – Sunday 6:00 PM to 6:00 AM	
(Note: Work schedules are based upon the needs of OEM Fabricators and may be subject to change on a weekly basis.)			

EDUCATION

Name/Location of School	Course of Study	No. of Years Completed	Date of Degree/Diploma
Graduate			
College			
Business/Trade/Tech.			
High School			
Elementary			

ADDITIONAL EXPERIENCE/QUALIFICATIONS

List any other experience, special training, skills or qualifications that you believe should be considered in evaluating your qualifications for employment (machine operation, blue print reading, etc.):

ATTENDANCE/PUNCTUALITY

Consistent attendance and punctuality are essential requirements of every job with this company. Is there anything that would interfere with your regular attendance and punctuality if you were offered a job with the company?

Yes No If yes, please explain:

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REFERENCES

(List **work** references)

Name	Phone No.	Title/Relationship
Name	Phone No.	Title/Relationship
Name	Phone No.	Title/Relationship
Name	Phone No.	Title/Relationship

EMPLOYMENT

Begin with your most recent employment and continue with all past employment.
(Attach a separate sheet if necessary)

<u>Company Name</u>	<u>Telephone:</u>
<u>Address (Include City/State)</u>	<u>Employed from -To (Month/Year)</u>
<u>Name of Supervisor</u>	<u>Hourly Rate</u>
	<u>Start:</u> <u>Finish:</u>
<u>State Job Title and Describe Your Work</u>	<u>Reason for Leaving</u>

<u>Company Name</u>	<u>Telephone:</u>
<u>Address (Include City/State)</u>	<u>Employed From -To (Month/Year)</u>
<u>Name of Supervisor</u>	<u>Hourly Rate</u>
	<u>Start:</u> <u>Finish:</u>
<u>State Job Title and Describe Your Work</u>	<u>Reason for Leaving</u>

<u>Company Name</u>	<u>Telephone:</u>
<u>Address (Include City/State)</u>	<u>Employed From - To (Month/Year)</u>
<u>Name of Supervisor</u>	<u>Hourly Rate</u>
	<u>Start:</u> <u>Finish:</u>
<u>State Job Title and Describe Your Work</u>	<u>Reason for Leaving</u>

We may contact the employers listed above unless you indicate those you **do not** want us to contact below.

DO NOT contact employer (s) : _____ Reason: _____

_____ Reason: _____

PHYSICAL DATA

Can you perform the essential functions of the position for which you are applying? Yes [] No []
If no, are there reasonable accommodations that can be made to allow you to perform the essential functions of the job?

(If you have any questions as to what functions are applicable to the position for which you are applying, please ask the interviewer before you answer this question.)

SKILLS IDENTIFICATION

Check all that apply:

Can You:

- Read a tape measure
- Read a micrometer
- Read blueprints
- Run a computer

Do you understand:

- Fractions
- Tolerance
- Geometric dimensioning
- Welding symbols

Check all that apply below which you have at least 6 months experience with:

- | | | |
|--|--|--|
| <input type="checkbox"/> Tig | <input type="checkbox"/> Lasers | <input type="checkbox"/> AutoCAD |
| <input type="checkbox"/> Mig | <input type="checkbox"/> Crane Operation | <input type="checkbox"/> Flamecutting, Machine |
| <input type="checkbox"/> CNC Equipment, Lathes/Mills | <input type="checkbox"/> Estimating | <input type="checkbox"/> Metrics |
| <input type="checkbox"/> CNC Brake Press | <input type="checkbox"/> CNC Programming | <input type="checkbox"/> Purchasing |
| <input type="checkbox"/> Sawing | <input type="checkbox"/> Inspection | <input type="checkbox"/> Shipping/Receiving |
| <input type="checkbox"/> Forklifts | <input type="checkbox"/> AP/AR/GL | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Painting, Industrial | <input type="checkbox"/> Supply Chain Management | <input type="checkbox"/> Customer Service |
| <input type="checkbox"/> Roamer Arm | <input type="checkbox"/> SolidWorks | <input type="checkbox"/> Sales |
| <input type="checkbox"/> CMM | <input type="checkbox"/> Expediting | <input type="checkbox"/> Cost Accounting |
| <input type="checkbox"/> Crucial Conversations | <input type="checkbox"/> Inventory Control | <input type="checkbox"/> Mentoring |
| <input type="checkbox"/> Visual Manufacturing | <input type="checkbox"/> APICS | <input type="checkbox"/> Driving Truck/CDL |
| <input type="checkbox"/> MS Office | <input type="checkbox"/> Supervision | <input type="checkbox"/> OSHA |
| <input type="checkbox"/> Statics | <input type="checkbox"/> Sandblasting | <input type="checkbox"/> Hazardous Waste |
| <input type="checkbox"/> T-1 | <input type="checkbox"/> SME | <input type="checkbox"/> Six Sigma |
| <input type="checkbox"/> D1.1 | <input type="checkbox"/> AWS | <input type="checkbox"/> CadKey |
| <input type="checkbox"/> AR Plate | <input type="checkbox"/> SHRM | <input type="checkbox"/> Lean Manufacturing |
| | <input type="checkbox"/> Kaizan | <input type="checkbox"/> 5 s |

SIGNATURE

Did you complete this application yourself? Yes No

If no, please explain why: _____

The information I have provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.

I authorize OEM and/or its agents to investigate my background, work experience, criminal records, financial and credit reports. Therefore, I authorize and request any present or former employer, educational institution, law enforcement agency, credit reporting agency or other persons that have personal knowledge about me to furnish OEM and/or its agents, with any information in their possession regarding me in connection with the Employment Application I have provided to OEM – including all transcripts/school records and all of my personnel records with current and former employers. I hereby release said companies, credit agencies or persons furnishing information to OEM pursuant to this authorization from any liability or any damage whatsoever for issuing this information.

I understand final employment may be contingent upon specific requirements such as successful completion of a background check, reference check, criminal background check, verification of identity and employment eligibility, driver's license verification and passing a pre-employment drug screening.

I agree to abide by all employment and operational rules and regulations of OEM now in force and that may be established.

I understand that my application will be considered for any appropriate job opportunity with OEM that may exist now and for the next twelve months. It is my understanding that this notification may be made in person or by telephone. I FURTHER UNDERSTAND THAT THIS IS AN APPLICATION FOR EMPLOYMENT AND THAT NO EMPLOYMENT CONTRACT IS BEING OFFERED.

Date _____ Applicant Signature _____